

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | C-G- | | 08729-51 |
| O.I.P.E. CLASSIFIER | Lm | 32 | 9/5 |
| FORMALITY REVIEW | S.A! | 1082 | 10/09/01 |
| RESPONSE FORMALITY REVIEW | | | |
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INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 - Restricted O Objected

| Claim | Date |
|-------|----------|
| Final | Original |
| 1 | 1/4/1985 |
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| Claim | Date |
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| Final | Original |
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| Claim | Date |
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| Final | Original |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)